

Bureau of Health Care Quality and Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN5341PCA	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 12/09/2010
NAME OF PROVIDER OR SUPPLIER COMFORT KEEPERS			STREET ADDRESS, CITY, STATE, ZIP CODE 1575 DELUCCHI LN STE 219 RENO, NV 89502		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE	
P 000	<p>Initial Comments</p> <p>This findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of the Focused State Relicensure survey conducted in your agency on 12/07/10 - 12/09/10. The state relicensure survey was conducted at your agency by authority of Nevada Revised Statutes Chapter 449, Personal Care Agencies.</p> <p>The patient census was 98. Ten client records were reviewed. Four client contacts were made. Ten employee files were reviewed.</p> <p>The following regulatory deficiencies were found:</p>	P 000			
P 060	<p>Section 14.1(2) Administrator Responsibilities</p> <p>2. The administrator of an agency shall represent the licensee in the daily operation of the agency and shall appoint a person to exercise his authority in his absence. The responsibilities of an administrator include, without limitation:</p> <p>(a) Employing qualified personnel and arranging for their training;</p> <p>(b) Ensuring that only trained attendants are providing services to a client of the agency and that such services are provided in accordance with the functional assessment of the client, the service plan established for the client and the policies and procedures of the agency;</p> <p>(c) Developing and implementing an accounting</p>	P 060			

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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P 060	<p>Continued From page 1</p> <p>and reporting system that reflects the fiscal experience and current financial position of the agency;</p> <p>(d) Negotiating for services provided by contract in accordance with legal requirements and established policies of the agency;</p> <p>(e) Providing oversight and direction for attendants and other members of the staff of the agency as necessary to ensure that the clients of the agency receive needed services;</p> <p>(f) Developing and implementing policies and procedures for the agency, including, without limitation, policies and procedures concerning terminating the personal care services provided to a client;</p> <p>(g) Designating one or more employees of the agency to be in charge of the agency during those times when the administrator is absent; and</p> <p>(h) Demonstrating to the Health Division upon request that the agency has sufficient resources and the capability to satisfy the requests of each client of the agency related to the provision of the personal care services described in the service plan to the client.</p> <p>This STANDARD is not met as evidenced by: Based on record review and interview, the agency failed to do annual performance evaluations as required per agency policy (page 20, section 17 "Supervision of Services") for 3 of 3 employees in the sample who had been employed more than a year and who performed client care (Employee #2, #3 and #5).</p> <p>1. Agency policy stated "each staff member providing services to a client shall be evaluated in writing by his or her supervisor, at least annually,</p>	P 060			

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P 060	Continued From page 2 either through direct observation or demonstration, on the job tasks the staff member is required to perform". 2. Employee #2 was hired in July 2008. Her personnel file lacked evidence of a performance evaluation for 2009 and 2010. 3. Employee #3 was hired in February 2004. Her personnel file lacked evidence of a performance evaluation for 2009 and 2010. 4. Employee #5 was hired in September 2006. Her personnel file lacked evidence of a performance evaluation for 2009 and 2010. Scope: 3 Severity: 2	P 060			
P 250	Section 16.1(3) Competency Evaluation 3. The administrator or his designee shall evaluate the competency of an attendant in each competency area required by the agency if the attendant provides written proof of his current or previous training in that competency area. After the initial evaluation, any additional training provided to the attendant may be limited to areas in which the attendant needs to improve his competency. This STANDARD is not met as evidenced by: Based on record review, the agency failed to evaluate the competency of 1 of 1 attendants that presented certificates of previous training from another agency (Employee #10). 1. Employee #10 was hired in November, 2010. She presented a certificate which stated she had completed 18 hours of basic care training at	P 250			

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P 250	Continued From page 3 another agency. Employee #10 began caring for clients on 11/30/10 without having her competencies evaluated. Scope: 3 Severity: 2	P 250			
P 280	Section 17/1(2) Documentation of Supervision 2. Each supervisory visit and each telephone call must be documented. The documentation must be dated and signed by the administrator or his designee. Each supervisory visit and each telephone call must consist of an evaluation of whether: (a) Appropriate and safe techniques have been used in the provision of personal care services to the client; (b) The service plan established for the client has been followed; (c) The service plan established for the client is meeting the personal care needs of the client; (d) The attendant providing personal care services to the client has received sufficient training relating to the personal care services that the attendant is providing to the client; and (e) It is necessary for the administrator or his designee to follow up with the attendant or client concerning any problems in the personal care services being provided to the client or the service plan established for the client that are identified as the result of the supervisory visit or telephone call. This STANDARD is not met as evidenced by: Based on client file review, policy and procedure review and interview, the agency failed to have documentation of supervisory contact in 7 of 10 client files (Clients #1 - #7).	P 280			

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P 280	<p>Continued From page 4</p> <p>1. Ten client files were reviewed. All client files lacked documented evidence of supervisor visits, either on-site or by phone. Three of the clients had been with the agency less than six months.</p> <p>2. Agency policy (last reviewed and revised 10/20/10, page 20 section 17 "Supervision of Services") stated a supervisor shall make a supervisory home visit every six months.</p> <p>3. The administrator designee was interviewed and stated she spoke with the clients on the phone frequently and if there was an issue, she would document the issues on her computer.</p> <p>Scope: 3 Severity: 2</p>	P 280			

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